

State of California—Health and Human Services Agency Department of Health Care Services



August 26, 2019

To: Tribal Chairpersons, Designees of Indian Health Programs, and

Urban Indian Organizations

Subject: Notice of Proposed Change to the Medi-Cal Program

The purpose of this letter is to provide information regarding a proposed change to the Department of Health Care Services' (DHCS) Medi-Cal Program that will be submitted to the Centers for Medicare and Medicaid Services (CMS). DHCS is forwarding this information for your review and comment.

DHCS is required to seek advice from designees of Indian Health Programs and Urban Indian Organizations on Medi-Cal matters having a direct effect on Indians, Indian Health Programs or Urban Indian Organizations per the American Recovery and Reinvestment Act of 2009 (ARRA). DHCS must solicit the advice of designees prior to submission to CMS of any State Plan Amendment, waiver requests or modifications, or proposals for demonstration projects in the Medi-Cal program.

Please see the enclosed summary for a detailed description of this DHCS proposal.

QUESTIONS AND COMMENTS:

Indian Health Programs and Urban Indian Organizations may also submit written comments or questions concerning this proposal within 30 days from the receipt of notice. Comments may be sent by email to Angeli.Lee@dhcs.ca.gov or by mail to the address below:

CONTACT INFORMATION

Department of Health Care Services Director's Office ATTN: Angeli Lee MS 0000 P.O. Box 997413 Sacramento, CA 95899-7413 Tribal Chairpersons, Designees of Indian Health Programs And Urban Indian Organizations Page 2 August 26, 2019

In addition to this notice, DHCS plans to cover this SPA in the next quarterly Medi-Cal Indian Health webinar. Please note that Indian Health Programs and Urban Indian Organizations may also request a consultation on this proposal at any time as needed.

Sincerely,

Original Signed By

Sandra Willburn, Chief Primary, Rural, and Indian Health Division Department of Health Care Services

Enclosure



Department of Health Care Services Tribal and Designees of Indian Health Programs Notice

PURPOSE

The Department of Health Care Services (DHCS) proposes to submit State Plan Amendment (SPA) 19-0048 to the federal Centers for Medicare and Medicaid Services (CMS) to seek necessary approvals to authorize a time-limited supplemental payment program to support trauma screenings for children and adults enrolled in full-scope Medi-Cal coverage.

BACKGROUND

California voters approved the California Healthcare, Research and Prevention Tobacco Tax Act¹ (commonly known as Proposition 56 (Prop. 56)) to increase the excise tax rate on cigarettes and tobacco products on November 8, 2016. Under Prop. 56, a specified portion of the tobacco tax revenue is allocated to DHCS for use as the state's share of some Medi-Cal expenditures in accordance with the annual state budget process. The Budget Act of 2019² appropriates Prop. 56 funds for specified DHCS health care expenditures during the 2019-20 state fiscal year. This includes up to \$45 million allocated for supplemental reimbursement payments for trauma screenings for children and adults.

SUMMARY OF PROPOSED CHANGES

SPA 19-0048 proposes to add a fixed supplemental payment rate of \$29 to support trauma screenings for all children and adults with full-scope coverage in Medi-Cal. Screenings will be billed and reimbursed in both the managed care and fee-for-service (FFS) delivery systems. Medi-Cal providers will use Healthcare Common Procedure Coding System (HCPCS) Codes include G9919 for a positive screening (a score of 4 or greater) and G9920 for a negative screening (a score of 0-3). Medi-Cal providers must complete DHCS' training for trauma screenings in order to be eligible for the supplemental payments. These payments will be in addition to the amounts paid for the office visit that accompanies the screening in FFS scenarios or capitation paid by Medi-Cal managed care plans. Medi-Cal providers will be able to bill for children under 21 years of age to receive periodic rescreening as determined appropriate and medically necessary, not more than once per year, per provider. No more than one screening per provider in the adult's lifetime.

The proposed effective date for SPA 19-0048 is January 1, 2020, with a proposed end date of December 31, 2021. Implementation of this proposal is subject to CMS approval.

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¹ The California Healthcare, Research and Prevention Tobacco Act of 2016 is

² Assembly Bill 74 (Ting, Chapter 23, Statutes of 2019)



IMPACT TO TRIBAL HEALTH PROGRAMS

To the extent that Tribal health programs provide trauma screenings, an increase in Medi-Cal beneficiaries accessing the services may occur. Supplemental payments will be available as a Fee-for-Service (FFS) payment in addition to the Office of Management and Budget Indian Health Service per visit rate.

IMPACT TO FEDERALLY QUALIFIED HEALTH CENTERS (FQHCs)

To the extent that FQHCs provide trauma screenings, an increase in Medi-Cal beneficiaries accessing the services may occur. Supplemental payments will be available as a FFS payment in addition to the Prospective Payment System per visit rate.

IMPACT TO INDIAN MEDI-CAL BENEFICIARIES

Medi-Cal beneficiaries may have improved access to trauma screenings and treatment for any condition discovered during the screening.

RESPONSE DATE

Indian Health Programs and Urban Indian Organizations may also submit written comments or questions concerning this proposal within 30 days from the receipt of notice. Comments may be sent by email to Angeli.Lee@dhcs.ca.gov or by mail to the address below:

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